(i)	Depart	ment of P	ublic	с Не	alth a	nd Social S	ervices			
1 24	Food F					ental Health		Pane	1 0	ı 2
INSPECTION RSN TYPE GRADE INSPECTION DATE Regular 8 / 28 / 20/7				ESTABLISHMENT NAME  ABLISHMENT NAME						
Regular /	8/2	8 1 201	2		A 15	C Store	5- GLUM #50	25		
Follow-up	/ TIME IN	TIME OL	JT	IPER	MIT HO	DI DER				
Complaint	RATING 1.50pm	2.30	10	LOCATION (Address) 1083 West Marine DR M						
Investigation	A SANITARY I	PERMIT NO.	٦	LOC	ATION	(Address)	83 west har	re DR	MIC	10
Other: ESTABLISHM	ENT TYPE	TELEBRO	> NE	V	MAIL	D ೬ ಚಿನ(೧) Factor/Interven	GU		214 244	
Reta		537-1	HAH	No. (	of Risk	ractor/interven	Intervention Violations	HIS RES	SK CAT	TEGÓR
	ODBORNE ILLNESS R	SK FAC	TO	D S	AND	DIIRIIC	HEALTH INTERV	ENTIONS		
	Circle designated compliance (IN, 0								,	
IN = In compliance O	UT = Not in compliance N/O = Not obser	ved N/A = No	t applic	cable	COS =	Corrected on-site	during inspection R = Repeat		= Deme	erit points
Compliance Status	Cupandalan	cos	R	PTS	Соп	npliance Statu			cos	R P1
4 10	Supervision Person in charge present, demonstrates	3		_	16	IN OUT (N/A) N/	otentially Hazardous Food Proper cooking time and term	I (TCS Food)	T	1.6
1 IN OUT	knowledge, and performs duties			6	1/7	IN OUT (NIE) NI	O Proper reheating procedures	for hot holding	+-+	6
2 [IN QU]	Employee Health		11.25	0	18	IN (AM) TUO NI	O Proper cooling time and temp	peratures		6
3 IN OUT	Management awareness, policy present Proper use of reporting, restriction & exi			6		IN OUT NA NA	O Proper hot holding temperatu Proper cold holding temperat		X	6
	Good Hygienic Practices		AUTO	125751			O Proper date marking and dis	position	X	6
4 N OUT NA NO	Proper eating, tasting, drinking, beteinut	or		6	25738		Consumer Adviso	- Processor	7,833	7.14
5 (N) OUT N/A N/O	No discharge from eyes, nose, and mou	th		6		of a constant		,,,		
The Part of the Pa	reventing Contamination by Hand				22	IN OUT (NA)	Consumer Advisory provided	for raw or		6
6 (N) OUT N/A N/O				6			undercooked foods			
7 IN OUT (N/A) N/O	No bare hand contact with ready-to-eat approved alternate method properly folio			6			Highly Susceptible Pop			
8 (IN) OUT	Adequate handwashing facilities supplie			6	23	IN OUT (N/A	Pasteurized foods used; proh offered	ioitea todas nat		6
0 (111)001	accessible					THE RESERVE	Chemical			
9 (II) OUT	Approved Source Food obtained from approved source		-	6	24	NOUT N/A	Food additives: approved and	I properly used		6
10 IN OUT N/A (N/O			$\rightarrow$	6	05	(5	Toxic substances properly ide	entified stored	-	-
11 (N) OUT	Food in good condition, safe, and unadu			6	25	N OUT	used			6
12 IN OUT WA NO	Required records available shellstock to parasite destruction	igs,		6	12.0	Co	nformance with Approved			75
200 2000	Protection from Contamination	1-22			26	IN OUT (N/A)	Compliance with variance, sp process, and HACCP plan	ecialized		6
13 IN OUT N/A	Food separated and protected			6		Risk factors a	re improper practices or proced	ures identified a	s the mr	net
14 IN OUT (N/A)	Food contact surfaces: cleaned & sanitize Proper disposition of returned, previously			6		prevalent contr	ibuting factors of foodborne illne	ess or injury. Pu	blic Heal	itth
15 р оит	served reconditioned, and unsafe food			6			re control measures to prevent	foodborne illnes	s or injur	у
		GOOD F	RET	<u>AIL</u>	PR/	CTICES	<b>用题类型的现在分词</b>	PHANAA SA		
Mark "X" in box: If	Good Retail Practices are preventative n numbered item is not in compliance and/o	neasures to cor ir if COS and/or	ntrol the r R	e intro	=Correct	of pathogens, che ted co-site during	micals, and physical objects int inspection R=Repeat violati	o foods. on PTS ≐De	most so	inte
Compliance Status		cos		PTS		pliance Status				RPT
27   Pasteurized	Safe Food and Water eggs used where required			4	40		Proper Use of Uten	ella	763	AL O
	ce from approved source		-	1	40		nsils: properly stored quipment and linens; properly s	tored dried		1
				2	41	handled				1
29 Variance ob	tained for specialized processing methods Food Temperature Control			1	42	Single-use Gloves use	/single-service articles: property	stored, used		1
30 Proper cooli	ng methods used; adequate equipment fo	r			45	Gioves use	Utensils, Equipment and	Vending		1
temperature			_	1	44	Food and r	nonfood-contact surfaces cleans	ible, properly		1
	roperly cooked for hot holding		-	1	$\vdash$		constructed, and used ing facilities: installed, maintain	ad used: teet		
	awing methods used			1	45	strips		o, useu, test		1
33 Thermometer	r provided and accurate Food Identification			1	46	Nonfood-co	ontact surfaces clean			1
34 Food proper	ly labeled; original container	Т		1	47	Hot & cold	Physical Facilitie water available, adequate press		PORT OF THE PARTY.	2
	Prevention of Food Contamination	14/22 0	LY/Au	600	48		nstalled; proper backflow device			2
Castaminal	ents, and animals not present on prevented during food peparation, stora	7 2	_	2	49	Sewage an	d wastewater properly disposed	l		2
display		iãe m		1	50	Toilet facilit	ties: properly constructed, supp	ied, & cleaned		2
37 Personal cleanliness				1	51		fuse properly disposed; facilitie			2
38 Wiping cloths: properly used and stored 39 Washing fruits and vegetables			$\dashv$	1						1
	and understand the above viola	tion(s), and		1	53	Adequate v	entilation and lighting; designat Documents and Plac		3. 275. 20.20	1
A lam aware of	the corrective meesures that sh			[	54	Sanitary Pe	rmit, Health Certificates valid a			1 2
Face Charle (Frint	ind Bigh						ate: \$474/17			
EH Inspector (Print and	(Sign)	1.5	C10.1	2	1200	211	No.	NO Fo	llow-up	Date
	Mitchell Epily-IP						ollow-up (Circle one): YES	NO F	9/71	12017
Rev: 08.27.15		White: DPHSS/	DEH-	YOU	Food	Establishment				

Depa	ertment of Publ Division of	lic Health and Environment	Social Service: al Health	5			
Food	Establish	ment Ins	pection Rep	ort	Page (	Cof 🚣	
STABLISHMENT NAME	7	LOCATION (Ad	dress) 1088 W	OST MUTTE	- DIL A	Comp	
HIBC STOIRS - GUAR HIS	YMAIL	Dadada					
INSPECTION DATE SANITARY PER	PERMIT HOLD	Storas - 6	tendo la l				
	TEMPERATU			uar) Inc.		8 30	
Item/Location	Temperature		Item/Loca	ation	Tomas	enturo (E.F.)	
Mara egg burger / Hold Hold			tterii/Eoca	10011	rempe	rature (* F)	
Span inush 6 // 11	116.50	i,c					
ShriAn Ansubil	116.°F						
Cripter Salad / 1	ATU 44.001		<del></del>				
STILLER SALLE / 1	91.17		4		-		
		Service Committee	HCYRC LIPE AND	J-12	A CONTROL OF THE PARTY OF THE P	CORRECT	
EM NO. OBSER	VATIONS A	ND CORRE	CTIVE ACTIO	NS		BY DATE	
olations cited in this report must be co	orrected within	the time fran	es indicated, or	as stated in Se	ections 8-4	05.11 and	
	· · · · · · · · · · · · · · · · · · ·	he Guam Foo					
A regular inspect	ZAW NOT	Londuc	ed on the	is day			
A regular inspect	y violati	ons wer	e observed	ai /	100		
#2 Employee health  Employee health  Contamination A	in Puilor	it in ol	46.			9/1/20	
Gadwa houth	مانة فلا	all he so	01:42 1	Die Die	A - Ol - Brade	1/1/20	
Contaba action	511 64 346	Indust.	131400 1	<i>v</i>	provery		
TOU FUTURE FIGH AT	TUM JEGG.	pyser	<u> </u>				
72 10 1 1 Class + 100	:1	1- 6					
#33 Metal Stem-type Metal Stem type	1 re= 170 me-	RYS NOT	provided.	. 1 1 .		- 1	
me 12/ Ster +1/2	ther hom	eters sh	eil be pro	vided to	Qi- Jane	9/28/	
internal temperatur	os of fa	ood prod	4c+s are	at the	proper		
temperatures			<u>.</u>		1		
	<u> </u>	. <u> </u>					
#19 PHF/TCS not had	PHF/TCS not hold at proper temperature - such as cos						
GOUN AUGUS! GARAR MU							
ALL PHF/TLS Shall	be held	A+ 140	of and ab	we for 1	hot hold		
70 prevent the rapid o	archeth of 1	bacter a				フ	
#70 PHF/TCS not hold	1		100 c State 25	Usicken s	Colod	cos	
Wap-that chille descen salad.						Thrown D	
Contract Con	ZN SAING.					אונופאווע ע	
ALL PHF/ TES Shall	h- 1 1 6	L Mile	1 1 1 1 1 1	C	111		
7.77	be full a	,			olding		
ed on the inspection today, the items listed above identi	ty violations which sh	hall be corrected by	the date specified by	the Department, Failu	re to comply m	ay result in	
Immediate auspension of the Sanitary Permit or downgr mitted to the Director within the period of time setablish	aple. If steeking to app	peal the result of a	y notice or inspection	findings, a written rec	uest for hearin	g must be	
sen in Charge (Print and Sign)	A Trouble to the	orresidia.		Date	" Phul	7	
Inspector (Print and Sign)	<del>1</del>	····-	A :		0/24/1	/	
Derin Mitchill EPHOTA	15.4	21/2 E	PHO I	Dat	8/38/	2017	
Rev: 08.27.15	White: DPHSS/DEH	Yellow: Food E	leblishment				

	Department of Public Health and Social Services  Division of Environmental Health							
1	Food Establishment Inspection Report Page	3 of 3						
ESTABLISH	IMENT NAME    LOCATION (Address)   Location New   Location Name   Location (Address)   Location Name   Location Name   Location (Address)   Location Name   Lo	<u></u>						
AB	MENT NAME LOCATION (Address) 1080 west have DR B, we That Dedado Gu	•						
	PECTION DATE SANITARY PERMIT NO. PERMIT HOLDER 128 1 2017 17002623 ABC Stores - Guam Inc.							
ITEM NO.	OBSERVATIONS AND CORRECTIVE ACTIONS	CORRECT BY DATE						
Violations cited in this report must be corrected within the time frames indicated, or as stated in Sections 8-405.11 and 8-406.11 of the Guam Food Code.								
	photos were taken							
	or; 200d Pic on inspection report							
	Removed "A" Placard No! (unknown)							
	1550 ad "A" placard No. 02489							
ased on the in	aspection today, the items listed above identify violations which shall be corrected by the date specified by the Department. Failure to comply in suspension of the Sanitary Permit or downgrade. If seeking to appeal the result of any notice or inspection findings, a written request for hearing the sanitary Permit or downgrade.	nay result in						
nowitted to th	le Director within the period of time established in the notice forecrections.	illust ne						
	GLOW MALANTIA (N. FIRE)	17						
En Hispector	(Print and Sign)  Print And Filen Ephreff	200						
Rev:	08.27.15 White: DPHSS/DEH Yellow: Food Establishment							